



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/911,904	07/23/2001	Spencer B. Farr	400742000200



Terri M. Shieh-Newton  
 Morrison & Foerster LLP  
 755 Page Mill Road  
 Palo Alto, CA 94304-1018

CONFIRMATION NO. 4189

## FORMALITIES LETTER



\*OC00000008026428\*

Date Mailed: 05/06/2002

## NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL)

*Filing Date Granted*

The U.S. Patent and Trademark Office has received your reply on 04/09/2002 to the Notice to File Missing Parts (Notice) mailed 11/06/2001 and it has been entered into the nonprovisional application. The reply, however, does not include the following items required in the Notice.

The period of reply remains as set forth in the Notice. You may, however, obtain EXTENSIONS OF TIME under the provisions of 37 CFR 1.136 (a) accompanied by the appropriate fee (37 CFR 1.17(a)).

A complete reply must be timely filed to prevent ABANDONMENT of the above-identified application.

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- A substitute specification in compliance with 37 CFR 1.52 because:
  - Papers contain improper margins. *Each sheet must have a left margin of at least 2.5 cm (1") and top, bottom and right margins of at least 2.0 cm (3/4")*

*A copy of this notice MUST be returned with the reply.*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL FOR FY 2002



Patent fees are subject to annual revision.

## Complete if Known

Application Number	09/911,904
Filing Date	July 23, 2001
First Named Inventor	Spencer B. FARR
Examiner Name	To Be Assigned
Group Art Unit	1642

## TOTAL AMOUNT OF PAYMENT

(\$780.00)

Attorney Docket No. 400742000200

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 03-1952

Deposit Account Name Morrison &amp; Foerster LLP

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.272.  Payment Enclosed: Check  Credit Card  Money Order  Other

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions of the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per properties (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify) Adjusted five-month extension of time \$980.00 - \$200.00					780

SUBTOTAL (2) (\$0.00)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$780.00)

\*\* or number previously paid, if greater; For reissues, see above.

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Terri M. Shieh-Newton	Registration No. (Attorney/Agent)	47,081	Telephone	(650) 813-5649
Signature				Date	June 6, 2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.



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0300 \$

PTO/SB/21 (08-00)

Approved for use through 10/31/02. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number Of Pages In This Submission	174	Attorney Docket No.	400742000200
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### ENCLOSURES (check all that apply)

- |                                                                                                 |                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                        |
|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form plus copy for fee processing (2 pages) | <input type="checkbox"/> Assignment Papers (for an Application)                         | <input type="checkbox"/> After Allowance Communication to Group                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> Fee Attached                                                           | <input type="checkbox"/> Drawing(s)                                                     | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences                                                                                                                                                                                                                                                                                                                    |
| <input type="checkbox"/> Amendment / Reply                                                      | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)                                                                                                                                                                                                                                                                                                             |
| <input type="checkbox"/> After Final                                                            | <input type="checkbox"/> Petition                                                       | <input type="checkbox"/> Proprietary Information                                                                                                                                                                                                                                                                                                                                                       |
| <input type="checkbox"/> Affidavits/declarations                                                | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Status Letter                                                                                                                                                                                                                                                                                                                                                                 |
| <input checked="" type="checkbox"/> Extension of Time Request (1 page)                          | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ol style="list-style-type: none"> <li>1. Copy of Notice of Incomplete Reply (Nonprovisional) (1 page)</li> <li>2. Response to Notice of Incomplete Reply (Nonprovisional) (2 pages)</li> <li>3. Substitute Specification in compliance with 37 C.F.R. 1.52 (167 pages)</li> <li>4. Return Receipt Postcard</li> </ol> |
| <input type="checkbox"/> Express Abandonment Request                                            | <input type="checkbox"/> Terminal Disclaimer                                            |                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> Information Disclosure Statement                                       | <input type="checkbox"/> Request for Refund                                             |                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                                 | <input type="checkbox"/> CD, Number of CD(s) _____                                      |                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application                      |                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53                    |                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                        |
- Remarks \_\_\_\_\_

### SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual Name	Morrison & Foerster LLP, 755 Page Mill Rd, Palo Alto, California 94304-1018 Terri M. Shieh-Newton, Reg. No. 47,081
Signature	
Date	June 6, 2002

### CERTIFICATE OF MAILING BY "EXPRESS MAIL"

Express Mail Label No.: EV 093227027 US

Date of Deposit: June 6, 2002

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to Assistant Commissioner for Patents, Washington, D.C. 20231.

  
Tamara Alcaraz

Burden Hours Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



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PATENT  
Docket No. 400742000200

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Tamara Alcaraz

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Spencer B. FARR et al.

Serial No.: 09/911,904

Filing Date: July 23, 2001

For: CANINE TOXICITY GENES

Examiner: To Be Assigned

Group Art Unit: 1642

## RESPONSE TO NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL)

Box MISSING PARTS  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Enclosed please find the following:

1. Substitute Application with revisions from April 5, 2002 Preliminary Amendment.

During a conversation with Customer Service at the U.S. Patent & Trademark Office on May 14, 2002, permission was given to include the revisions from the Preliminary Amendment submitted April 5, 2002 to the U.S. Patent & Trademark Office to the Substitute Application that we are submitting.

Please note that Applicant is submitting a total of \$780.00 of which \$980.00 is for a 5 month extension of time to extend the date from May 6, 2002 to June 6, 2002 minus the \$200.00

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01 FC:228 780.00 CH

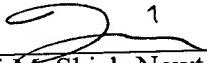
fee previously paid on April 5, 2002 that extended the date to file the Missing Parts from January 6, 2002 to March 6, 2002.

The Assistant Commissioner is hereby authorized to charge any fees under 37 C.F.R. §§ 1.16, 1.17, and 1.21 that may be required by this transmittal, or to credit any overpayment, to **Deposit Account No. 03-1952**.

Respectfully submitted,

Dated: June 6, 2002

By:

  
Terri M. Shieh-Newton  
Registration No. 47,081

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